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FACSIMILE TRANSMISSION

DATE: August 6, 2003

OUR REFERENCE: VTE-111-D

TO: Examiner Karen Addison

FACSIMILE NO.: 703 746-4164

FROM: Thomas D. Helmholdt

RE: Amendment filed on July 3, 2003.

PAGES TO FOLLOW: -11-

MESSAGE: Please see a copy of the attached Amendment
 previously filed on July 3, 2003

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The received stamp of the Patent Office imprinted hereon acknowledges the filing of:

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Certificate of Mailing; Request for a One-Month Extension of Time with Duplicate; an Amendment; and checks for \$55.00 and \$84.00.

Applicant: Moler et al.

Serial No.: 09/772,273

Attrs. Docket: VTE-111-D

Date: July 3, 2003

Due Date: July 3, 2003

TDH/cmp



Our Reference: VTE-111-D

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Jeff Moler et al.
Serial Number: 09/772,273
Filing Date: January 29, 2001
Examiner/Art Group Unit: Medley, Peter M./2834
Title: APPARATUS HAVING A SUPPORT
STRUCTURE AND ACTUATOR

CERTIFICATE OF MAILING AND TRANSMITTAL LETTER

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
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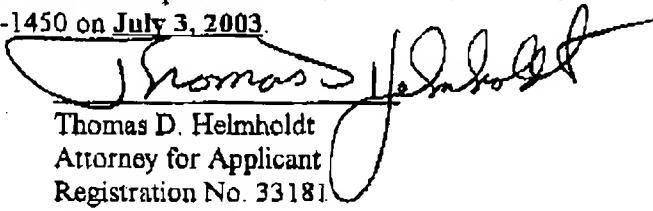
Transmitted with this document is a Postcard; Request for a One-Month Extension of Time with Duplicate; and an Amendment in the above-identified application.

Checks in the amount of \$55.00 and \$84.00 are attached.

Please charge any deficiency or credit any excess in the enclosed fees to Deposit Account Number 25-0115.

Applicant(s), and the Assignee (if applicable), hereby assert a claim to small entity status under 37 CFR 1.9 et. seq.

I hereby certify that this correspondence is being deposited with the United States Postal Service as First Class Mail in an envelope addressed to: Commissioner for Patents, Alexandria, VA 22313-1450 on July 3, 2003.



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SECOND AMENDMENT

Mail Stop: AF
Commissioner for Patents
P.O. Box 1450
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Sir:

If any charges or fees must be paid in connection with the following communication, they may be paid out of our Deposit Account No. 25-0115.

The Office Action dated March 3, 2003 has been received and carefully reviewed. Please amend the above-identified patent application as indicated below.